

## APPLICATION DATA SHEET

10/550771

Electronic Version v14

Stylesheet Version v14.1

***Applicant Information:*****Inventor 1:**

<b>Applicant Authority Type:</b>	Inventor
<b>Citizenship:</b>	SE
<b>Given Name:</b>	Goran
<b>Family Name:</b>	Dahlberg
<b>City of Residence:</b>	Granna
<b>Country of Residence:</b>	SE
<b>Address-1 of Mailing Address:</b>	Bunnstrom
<b>Address-2 of Mailing Address:</b>	
<b>City of Mailing Address:</b>	Granna
<b>State of Mailing Address:</b>	
<b>Postal Code of Mailing Address:</b>	SE-563 92
<b>Country of Mailing Address:</b>	SE
<b>Phone:</b>	
<b>Fax:</b>	
<b>E-mail:</b>	

**Inventor 2:**

<b>Applicant Authority Type:</b>	Inventor
<b>Citizenship:</b>	SE
<b>Given Name:</b>	Gustaf
<b>Family Name:</b>	Doragrip
<b>City of Residence:</b>	Jonkoping
<b>Country of Residence:</b>	SE
<b>Address-1 of Mailing Address:</b>	Vastra Holmgatan 6
<b>Address-2 of Mailing Address:</b>	
<b>City of Mailing Address:</b>	Jonkoping
<b>State of Mailing Address:</b>	
<b>Postal Code of Mailing Address:</b>	SE-553 23
<b>Country of Mailing Address:</b>	SE
<b>Phone:</b>	
<b>Fax:</b>	
<b>E-mail:</b>	

***Correspondence Information:***

***Application Information:***

**Title of Invention:** DEVICE FOR A POLE SAW  
**Application Type:** regular, utility  
**Attorney Docket Number:** 38821

**Botanic Information:**

**Publication Information:**

**Suggested Figure for Publication -**  
**Suggested Classification -**  
**Suggested Technology Center -**  
**Total Number of Drawing Sheets -**

***Representative Information:***

practitioner(s) at Customer Number:

116        \*116\*

as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

***Domestic Priority Information:***

This is a National Stage of WO application number PCT/SE2004/000468, filed 2004-03-26.

***Foreign Priority Information:***

**Doc.No:**0300989-1; **Country -** SE; **Date:** 2003-04-04 us-priority-claimed

***Assignee Information:*****Assignee 1:**

**Organization Name:** Aktiebolaget Electrolux  
**Address-1 of Mailing Address:** SE-105 45  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Stockholm  
**State of Mailing Address:**  
**Postal Code of Mailing Address:**  
**Country of Mailing Address:** SE

**Phone:**

**Fax:**

**E-mail:**